Under the Pageovo	nk Reduction Act of 1	1995, no per	sons are require	ed to respond to	38	collection of info	mation unles	s it display	s a volid OMB co	ntrol number.
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information under PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875								Application of the Control of the Co		307
CLAIMS AS FILED - PART I						SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
(Column 1)					ſ	DATE	FEE		RATE	FEE
FOR NUMBER FILED BASIC FEE		NUMBER EXTRA		}	RATE		-00		s	
(37 CFR 1.16(a))				l		3	OR ·			
TOTAL CLAIMS (37 CFR 1.16(c)) minus 20 a		·		١	x s=		OR	× 5=		
INDEPENDENT CLADAS (37 CFR 1.16(b))		minus 3 =	3 = .			x \$=		OR	x s=	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))						+s=		OR	+5=	
* If the difference in column 1 is less than zero, enter "O" in column 2.						TOTAL		OR	TOTAL	
/ CLAIMS AS AMENDED - PART II										
8/9/04 (Column 1) (Column 2) (Column 3)						SMALL	ENTITY	OR	OTHER SMALL	
2	CLAIMS REMAINING AFTER	,	HIGHEST NUMBER PREVIOUSLY	PRESENT EXTRA		RATE	ADOI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Treat	. 3 U	Minus '	PAID FOR.	• 7		x \$=		OR	xs 18 =	126.
D DY CFR 1.16(CF)	30	Minus	<u> </u>	= 1				OR	x : 86 =	86.
m mariner	1 4			D 1 16/61				OR	+5 =	-
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					j	TOTAL	 	OR	TOTAL ADD'L FEE	PAID
1 E						ADD'L FEE	<u> </u>	∞ ر	2000	7
V	(Column 1)	· · · · ·	(Column 2) HIGHEST	(Cotumn 3)	1			7	0.75	400/
EN 130	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
Total DE TOTALISCO	- 3//	Minus	" 1/1)	=	1	-X S=		OR	x 5=	
Z Independent	1. 71	Minus	- 1/1	. /	1	X \$	7	OR	x \$_=	
	1			CD 1 SEAT	1	+1/=		OR	+: _=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1,1669)					Ţ	TOTAL AOD'L FEE	1	OR	TOTAL ADD'L FEE	
					•	AUDIL FEE	L			
(Column 1) (Column 2) (Column 3) CLANAS HIGHEST CONTROL					7			7	RATE	ADDI-
12	REMAINING AFTER AMENDMENT		NUMBER PREVIOUSLY PAID FOR	PRESENT		RATE	ADDI- TIONAL FEE		TAILE	TIONAL FEE
Z Total profit Links	T	Minus	- 1)	5		x \$=		OR	x s=	}
Z Independent	- · ·	Minus	***	•	1	x \$=		OR	x s=	<u> </u>
		i e nepeune	OT CLAIM OF S	CFR 1.16(d))	1	+5 =		OR	+ \$=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (07 CFR 1.16(d))						TOTAL		T or	TOTAL ADO'L FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the IUSPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, IUSPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the Individual case. Any comments in the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Cficer, U.S. Patent on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Cficer, U.S. Patent of Commence, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SENO TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.